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Creating MAGIC for Triangle Residential Options for Substance Abusers (TROSAs)

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Creating MAGIC for Triangle Residential Options for Substance Abusers (TROSA)

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Keywords

positive psychology, social connections, trust, gratitude, meaningful connections, communications, therapeutic community

Disciplines

Psychology

Creating MAGIC for TROSA

Creating MAGIC for Triangle Residential Options for Substance Abusers (TROSA)

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In Partial Fulfillment of the Requirements for MAPP 702: Applied Positive Interventions

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Creating MAGIC for Triangle Residential Options for Substance Abusers (TROSA)

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Service Learning Project
MAPP 702: Applied Positive Interventions
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Triangle Residential Options for Substance Abusers (TROSA) is a structured, two-year residential program that provides comprehensive therapeutic care and vocational training to support long-term recovery within a community setting. Peer support and mutual responsibility for each resident's recovery is foundational to TROSA's mission, exemplified by "Each-One-Teach-One." This credo articulates the reciprocal nature of TROSA residents' experiences: gratitude for the support received then reaching out to give back. In response to TROSA's success in assisting individuals to maintain long-term recovery, resident numbers and consequently therapeutic and vocational staff hires have substantially increased. This growth presents challenges to maintaining TROSA's core values of social connections and trust among staff. With consideration of TROSA's mission, and the literature demonstrating the contributions of communication, gratitude, and high-quality connections to reinforcing social connections and trust, we present MAGIC, or Meaningful connections And Gratitude along with Improving Communication. The plan's modular and flexible components can be incorporated into daily activities, while a dedicated MAGIC Day can strengthen its components within TROSA. This two-part proposal aims to provide research-informed positive psychology applications to encourage and reinforce the social connections and trust that already exist and are vital for therapeutic communities like TROSA.

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INTRODUCTION

The cohort of Yumi Kendall, Linda Schiavone, and Yi Hui Tan from the University of Pennsylvania Master of Applied Positive Psychology (MAPP) program has worked with Triangle Residential Options for Substance Abusers (TROSA), a non-profit substance abuse recovery program located in Durham, North Carolina. Our cohort has interacted with Karen Kelley, Chief Program Officer, and Mari Poldervaart, Administrative Director. The objective of this collaboration is a proposal of positive psychology applications designed specifically for TROSA, through completing a situation analysis, a literature review of research, and an application plan.

SITUATION ANALYSIS

Scope of Substance Use and Treatment Overview

Substance use statistics in the United States are sobering. In 2014, a staggering 21.5 million adults (8.1% of the population) met clinical criteria for substance use disorder (Substance Abuse and Mental Health Services Administration [SAMHSA], 2015). Unlike substance use, substance use disorder occurs when the recurrent use of alcohol and/or drugs causes significant, functional impairment that results in the inability to meet one's responsibilities at home, work, and school (SAMHSA, 2015). It is not surprising, then, that substance use disorders incur a heavy personal, family, and community burden. Individuals with a history of substance use and abuse often have had unhealthy relationships, damaging and abusive family settings, few role models for good social functioning, disrupted education, and little or no vocational training. Sadly, the frame of reference for relational and social functioning for substance abusers is often one lacking in connection, community, trust, and meaning (M. Poldervaart, personal communication, January 19, 2017).

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The multidimensional and complex nature of substance abuse – having neurological, physiological, psychological, behavioral, social, and functional consequences that impact individual, family, work, and community functioning – requires a multifaceted treatment approach that addresses these many elements (National Institute on Drug Abuse [NIDA], 2012). The chronic, relapsing nature of the disease also necessitates a continuum of care to achieve and support long-term recovery. The best outcomes occur with longer-duration programs (NIDA, 2012, 2015), particularly 6 months or longer (NIDA, 2015). Two types of treatment models are outpatient, peer-driven, self-help programs, such as the 12-step addiction recovery model, and acute-care (<30 days), inpatient, medically oriented programs to manage substance withdrawal. In contrast, a therapeutic community (TC) is a residential treatment model that focuses on substance abuse recovery as an ongoing, long-term process that occurs within a peer-supported community (NIDA, 2012, 2016). This is the model TROSA uses. The effectiveness of TCs for substance abuse treatment and sustained recovery is based on several core components, the most foundational of which is “community as method” (NIDA, 2015). First, residents regain, and some gain for the first time, healthy and functional behaviors, relationships, communication, trust, and meaning amidst a community environment. Second, fundamental to TROSA’s core mission of “each-one-teach-one” is building a sense of belonging, as senior residents mentor incoming residents and each resident then turns around to help the next one who comes in. Lastly, the program promotes positive social connections, a strong sense of gratitude, and a duty to give back as residents willingly move through structured stages of treatment with increasing levels of responsibility and privileges, including active participation in and responsibility for peers’ recoveries in a mutual-help environment (NIDA, 2012, 2016).

Background on TROSA: History, Program Components, and Current Challenges

TROSA is a non-profit, 2-year residential TC that seeks to enable substance abusers to become healthy, productive members of their communities and families. Founded in 1994 by former addict Kevin McDonald, and with the support of Durham's community leaders, TROSA was modeled after San Francisco's Delancey Street Foundation where McDonald spent his 12 years of rehabilitation (<http://www.delanceystreetfoundation.org>, n.d.). TROSA's core mission of "each-one-teach-one," described above, was modeled after Delancey Street's same mission in the belief that each person is both a giver and a receiver. TROSA's success rate is inspiring: over 95% of its 2014 graduates maintained recovery one year after graduation (M. Poldervaart, personal communication, January 19, 2017). Essential to TROSA's "each-one-teach-one" mission is that former residents may become employed as staff upon successful completion of training programs. About 60% of TROSA's leaders and staff are former TROSA residents themselves, thus familiar with the experiences and challenges of substance abuse; they bring a strong sense of belonging to staff and residents. TROSA's staff also consists of 30% "straight staff," professionally trained therapists, counselors, and administrators who have not been addicts, and 10% are graduates of another TC (M. Poldervaart, personal communication, April 25, 2017).

Vocational and educational training within a TC promote personal accountability, self-efficacy, and social responsibility (NIDA, 2012, 2016), as well as developmental skills that many substance abusers have not yet mastered, such as being on time for work, communicating with customers, or working a register. Over two years, residents are assigned to TROSA's social enterprises with which residents may develop and apply job skills: Moving and Storage, Lawn Care, Thrift Store, and Tree Lots.

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TROSA has extensive therapeutic and continuing care programs that include evidence-based treatment modalities such as cognitive behavioral therapy, incentive-based therapy, community reinforcement, motivational interviewing, and family therapy (M. Poldervaart, personal communication, January 23 and April 25, 2017). Continuing care options for TROSA graduates include staying in supportive TROSA housing one more year to continue receiving community benefits and support. After-care programs and continuation of services help sustain recovery and encourage successful community re-entry (NIDA, 2012, 2016) (see Appendix 1). As described previously, TROSA graduates may also become employed as staff.

TROSA has grown substantially from 350 residents in 2012 to currently 480, with a corresponding increase in staff from 37 to 61. TROSA's rapid growth seems to be impacting its key strengths of connectedness and trust. It has exacerbated existing divisions within the TROSA community and created a schism interdepartmentally within the organization. Based on recent staff interviews, the most pertinent concern is a noticeable disconnect between the vocational and therapeutic departments, affecting both staff and residents (K. Kelley, personal communication, February 17, 2017). TROSA's leadership also meaningfully observes a "palpable" sense of lost connectivity and community on campus (M. Poldervaart, personal communication, January 19, 2017). Whereas previously residents and staff knew each other's names and would converse in passing, now there is decreased social connectivity. Growth has made everyone busy, with rare chances to make or strengthen connections. This lost connectivity has also negatively impacted communication, exacerbating individuals' differing perceptions of meaning and roles. While staff retention has remained constant during this time of growth, it remains uncertain to what extent resident recovery rates have been affected, if at all. These challenges suggest the need for

a more fundamental, comprehensive approach to reinforce trust and social connection across departments.

LITERATURE REVIEW

To identify appropriate applications to build social connections and trust, this section details the general research in these areas, as well as research relevant to the substance abuse community.

Social Connections

Social connection refers to the sense of closeness and positive experience arising from a relationship with another person or persons (Seppala, Rossomando, & Doty, 2013). A broad construct that spans across different sub-fields of psychology, it ranges from intimate, interpersonal concepts of attachment and social support to a wider context of social connectedness within a group or community. For clinical psychologists, the focus on social connection has been through *social support*: specifically, the presence of real or perceived social support from a helpful resource, information, or emotion, which can bolster our psychological health (Schaefer, Coyne, & Lazarus, 1981).

Another perspective of social connection is belongingness. Humans have a fundamental need to belong, characterized by having regular non-negative interactions, as well as having the perception that others care and will continue to care for us (Baumeister & Leary, 1995). This gives us a sense of fitting in with people or a group of people, and is distinct from positive close relationships. Even connecting with others with whom we are less acquainted contributes positively to our sense of self and motivations to perform, underscoring the importance of belongingness in our lives (Walton, Cohen, Cwir, & Spencer, 2012). Broadening the scope of connection further is the concept of social connectedness. It refers to the general and stable belief

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of how close we are with those around us and our social world (Lee & Robbins, 1995). Although stable, our sense of social connectedness can change over time based on previous or current relationships. For example, it is weakened when we experience long and difficult relationships or are exposed to a repeatedly embarrassing, uncomfortable, or unsupportive social context (Williams & Galliher, 2006). Thus, social connection is an essential component of an effective TC such as TROSA (NIDA, 2015).

Trust

Research on generalized trust explores whether people perceive if others can generally be trusted. Although its scope has been vague, the question, “Do you think that people can generally be trusted, or (alternatively), that you cannot be too careful in dealing with people?” has become a standard by which researchers have investigated general trust levels over the past fifty years (Helliwell & Putnam, 2004). This question’s ability to cross-culturally predict whether citizens think lost wallets will be returned makes it a useful measure of trustworthiness. People living in high-trust communities report higher life satisfaction and happiness, specifically in regards to this general trust question (Helliwell & Putnam, 2004).

Research on generalized trust has demonstrated its relevance to individual trust, which is a construct with two components: 1) Positive expectations of trustworthiness, and 2) Willingness to accept vulnerability (Fulmer & Gelfand, 2012; Chughtai, Byrne, & Flood, 2015). Positive expectations refer to one’s self-assured beliefs that the trustee (the entity in which trust is being placed) is competent, caring, and honest; willingness to accept vulnerability refers to an individual’s intention to depend on others (Chughtai, Byrne, & Flood, 2015). Thus, trust has been defined as the “psychological state comprising the intention to accept vulnerability based on positive expectations of the intentions or behavior of another” (Rousseau, Sitkin, Burt, &

Camerer, 1998, p. 395). These components of trust have been researched at three levels: interpersonal, team, and organizational/community.

Positive effects of individual trust at interpersonal trustee level include knowledge sharing, cooperation, communication, and performance, increased satisfaction with leaders, job satisfaction, less uncertainty at work, connectedness and increased commitment to organization, and increased creativity for both leaders and subordinates (Fulmer & Gelfand, 2012). Positive outcomes of individual trust in teams include increased team satisfaction and proactive problem solving, while positive outcomes of individual trust in organizations comprise intention to stay, cooperative and collaborative work relationships, employee satisfaction, citizenship behavior, and identification with the organization. Identifying with the organization's leader can also translate into trust in organization (Fulmer & Gelfand, 2012).

Distinct from individual trust, trust in teams shows lower trust in one another; additionally, physical distance has been found to negatively impact inter-team trust (Fulmer & Gelfand, 2012). One precursor to building team trust is leadership style. For example, reciprocity initiated by a trustee/leader has been found to positively affect inter-team trust. Team trust in leaders actually predicts team performance more than team trust in teams, emphasizing the distinction between trustees' effects on team trust. Outcomes of inter-team trust include enhanced team-level satisfaction, team performance, and learning (Fulmer & Gelfand, 2012).

Outcomes of organizational trust include increased compassion for one another when an organization's members share high levels of interpersonal trust, thus facilitating smooth transitions in organizational change, increasing job satisfaction, increasing willingness to support a teammate, and resulting in higher evaluations of partner performance. Trustworthy organizational practice has been found to enhance relationship-focused community and

positively promote employee connections, informal meetings, and employee competence development (Fulmer & Gelfand, 2012). Finally, with respect to repairing trust, violations are perceived as more challenging to repair when a violation occurs at higher versus lower operational levels. Because an atmosphere of trust is associated with positive relationship-focused community building, which is an essential component of a TC, cultivating trust is therefore key for TROSA.

Social Connections and Trust in the Context of Substance Abuse Recovery

To understand the roles of social connections and trust in the context of substance abuse recovery and TCs, it is useful to first uncover the different layers of connection related to the life experience of a substance abuser. Research has shown the prevalence of dysfunctional attachment styles in families of substance abusers. Specifically, excessively caring yet overprotective parenting styles influence earlier onset of substance abuse (Segura-García, et al., 2016), which suggests that social experiences need to be addressed cautiously to facilitate substance abuse recovery. Hence, social support is the foundational concept of a TC, in which all community members participate in the recovery process as therapist, facilitator, and peer. In particular, TC residents can identify, empathize, and bond with others who have had similar experiences (De Leon, 1994). Researchers have also suggested that a sense of belonging is an integral ingredient in TCs that motivates substance abusers towards positive behavioral change while buffering them from the negative sense of self when failing to meet expectations set by their recovery plans (Pearce & Pickard, 2012). Other than social connections, trust in the TC environment such as TROSA's plays a vital role in fostering the sense of psychological safety vital for substance abusers to overcome their fears and heal (De Leon, 1994).

Approaches to Strengthening Social Connections and Trust

Cultivating Gratitude

Gratitude, the sense that an entity beyond us is responsible for our beneficial experience (Watkins, Van Gelder, & Frias, 2009), can help strengthen social connections and trust. Research has found that feelings of gratitude enhance an individual's subjective well-being in daily life (Emmons & McCullough, 2003) and a person's trust in others (Watkins, Van Gelder, & Frias, 2009) and is associated with a sense of connectedness to others (Emmons & McCullough, 2003). Gratitude also improves social relationships through social bonding and pro-social behavior, which promote integration and cooperation with the rest of the group (Algoe, Haidt, & Gable, 2008). Gratitude also promotes helping behaviors (Watkins, Van Gelder, & Frias, 2009). Thus, establishing and promoting a culture of gratitude within TROSA through specific and consistent practices is a valuable tool for proactively building, strengthening, and sustaining positive relational changes, interconnectedness, and trust within departments and cross-departmentally. Gratitude practices also help set an expectation for attending to and acknowledging the positive that already exists within the organization, appreciating individuals' strengths, and valuing the goodness in others. Practices such as the Three Good Things exercise (Seligman, Steen, Park, & Peterson, 2005) and its variations (Watkins, Van Gelder, & Frias, 2009; Fredrickson, 2013) set a positive tone and prime the attendees for social connection and trust. Other practices to cultivate gratitude in an organization include gratitude journals (Lyubomirsky, 2007) that document "thank yous" (Peterson, 2006), fairness (Mayer, 2012), and giving back (Sekerka, Vacharkulksemsuk, & Fredrickson, 2012), gratitude letters (Seligman, Steen, Park, & Peterson, 2005), gratitude rituals (Fredrickson, 2009), having a gratitude partner (Lyubomirsky, 2007) to engage in strengths spotting (Niemic, 2013) or any way the partnership deems a best-fit means

of interaction (Schueller, 2014), and connecting with past beneficiaries (Grant & Berg, 2012).

Improving Communication

Effective communication builds trust. Several theories provide context for this reasoning. Social information processing theory suggests people form convictions, in part, via their social environment, and social identity theory suggests people seek to maintain a positive impression of the self. This latter theory yields a mechanism for why trust would increase at the interpersonal, team, and organizational levels (Fulmer & Gelfand, 2012). Exchanging gifts, sharing information, and engaging in task-unrelated talk have positive effects on interpersonal trust, as does having a leader who engages in open, positive communication, whose expression of genuine emotion inspires higher levels of trust from subordinates, and who provides sincere and timely apologies following violations (Fulmer & Gelfand, 2012). For inter-team trust, in-person communication tends to positively influence trust more than on-line communication (Fulmer & Gelfand, 2012). Leaders who convey collective values and information increase team trust in teams, especially for physically separated groups. At the organizational level, communication is another antecedent: reciprocal, effective, and courteous communication facilitates organizational trust between organizations (Fulmer & Gelfand, 2012). Generally, sharing valuable resources and information, communicating with inclusive language, requesting and responding to feedback, and disclosing appropriate and relevant personal anecdotes also cultivate trust (Dutton, 2003). Being aware of the impact of non-verbal cues is also key for effective communication. Over 50% of a message's effect is communicated through body language, 38% by the voice's volume, pitch, and tone, and just 7% by words (Dutton, 2003). Non-verbal communication can counteract status distinctions and create a feeling of mutual partnership rather than dominance,

which inspires increased collaboration (Dutton, 2003). Thus, both verbal and non-verbal techniques are essential components of effective communication.

Igniting High-quality Connections (HQC)

High quality connections (HQC) are the building blocks of positive relationships. While most people seek to create positive relationships in their personal lives, all too frequently, work relationships are neglected. However, the number of hours that many people spend at work suggests that enhancing meaningful workplace connections would be one way to increase life satisfaction and personal development (Dutton & Ragins, 2006). Benefits of HQC at the individual level include improved physical health (e.g., strengthened immune system, lowered blood pressure) (Dutton, 2003), and at the organizational level, increased cooperation, effective collaboration across departments, and employees' enhanced loyalty to their workplace (Dutton, 2003).

One pathway to HQC is respectful engagement, which connects and energizes individuals and increases self-esteem (Dutton, 2003). Respectful engagement refers to conveying presence (attentionally and physically), being genuine (presenting one's authentic self), using affirmative communication (with positive attitude and conveying interest, for example), effective listening, and supportive communication (mutual presence and openness) (Dutton, 2003).

Another pathway to HQC is trust: behaving with integrity, goodness, and reliability increases trust (Dutton, 2003). Cultivating trust includes sharing valuable information, self-disclosure (sharing valuable information about oneself), employing inclusive language, asking for and acting on feedback, and not punishing for errors (Dutton, 2003). Trust creates positive energy that renews and builds on itself. Additionally, pursuing meaningful interactions increases happiness as well as the quality of those interactions (Rath, 2015). Expanding one's work

identity to include meaningful human relationships has been shown to positively affect connections to work (Wrzesniewski, 2003). Therefore, meaningful HQCs can be transformative building blocks for cultivating social connections and trust for TROSA.

APPLICATION PLAN

Our proposal is to enhance TROSA's interdepartmental social connections and trust with positive psychology recommendations for Meaningful connections And GratITUDE along with Improving Communications, or MAGIC in short. The three dimensions of MAGIC are modular and can be introduced separately or concurrently based on what is feasible for the organization. Our intent is to keep the plan easy for TROSA to implement these recommendations without the need for external consultants, with straightforward language that will resonate with the community. The plan is also flexible so that TROSA can monitor staff responses and modify the recommendations to make them most effective within the context of their community. See Appendix 2 for one measurement tool to monitor the effects of this plan on social connections.

Fostering Meaningful Connections

Even as relationships become increasingly challenging to build in a growing organization, we envision several practical ways for TROSA to foster meaningful high quality connections (HQCs) in the micro-moments of staff interactions by encouraging respectful engagement:

- **Be present** – The key is to intentionally practice demonstrating presence by being attentive to your colleagues. 1) With a personal supporter (e.g., a randomly, computer generated MAGIC Partner assigned by TROSA), practice respectful engagement. 2) Schedule regular calls or meet-ups to calmly listen to each other without interrupting. Deliberately remove

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physical (e.g., tables and chairs) and/or emotional obstacles (e.g., anger and frustration) to help make a meaningful connection.

- **Don't forget to talk about "the good stuff"** – Actively encourage staff to not just voice problems but also share when things go well. This includes exercises to communicate constructive feelings and thoughts as well as recognize colleagues' positive essence: 1) At a team's first meeting, take time to expand staff introductions to uncover and talk about each person's special strengths and positive qualities. (See also *Positive Introductions* under section on Improving Communication). 2) In formal (meetings) and informal (spontaneous) occasions, share what you value in the other person. Do not assume that they know! 3) Reflective Best Self Exercise: A cross-departmental staff (e.g., MAGIC Partner) collects three positive stories from colleagues close to the other partner and shares those stories with the partner.

Cultivating Gratitude

To strengthen and sustain positive relational changes, TROSA can set organizational expectations by instituting simple yet consistent practices to cultivate a culture of gratitude.

- **Three Good Things** – 1) Invite staff to talk about three things that recently went well and/or for which they are grateful at the start of meetings or activities. With sustained practice, individuals will anticipate and come prepared to share their gratitude. 2) Other variations include detailing *one* thing that made you most grateful, describing *why* each good thing happened, what caused or helped the good event to occur, and spotlighting the qualities of the *giver* rather than the gift, which improves relationships and social benefits.
- **Gratitude Letter** – 1) Ask staff to write a letter formally thanking an individual who has been especially kind and to whom one has never expressed gratitude, describing in concrete

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terms why one is grateful. Letters can be exchanged informally or formally on an instituted Day of Gratitude, at a separate Gratitude Lunch, or deposited in a Gratitude Box. Encourage giver or receiver to read the letter aloud in the other's presence. 2) Select TROSA graduates or past employees to write a Gratitude Letter detailing an act of kindness or generosity by an individual that made a difference in his/her life. This connects employees to past beneficiaries and highlights how employees' efforts have been appreciated and valued.

- **Gratitude Ritual** – Plan a gathering to ritualize times of staff transition or departure to acknowledge the goodness that transpired and share insights or experiences from the beginning of one phase to another.
- **Gratitude/MAGIC Partner** – 1) Assign a personal supporter (e.g., MAGIC Partner) as a form of social support to foster appreciation and bridge relationships. 2) Engage in “strengths spotting,” whereby each acknowledges the use of a specific strength by the other and describes the circumstances in which it was observed. To help participants identify strengths and their application, provide examples of strengths relating to job-related skills (e.g., artistic ability, communication skills) as well as the 24 character strengths identified by the Values In Action survey (see www.viacharacter.org).

Improving Communication

To enhance TROSA's internal communication, especially pertinent due to its recent rapid growth, the following methods support affirmative, positive communication. Each skill may be used by individuals, in pairs, or in groups, via either structured or unstructured exercises. For example, a communication skill may be incorporated formally as an exercise at the start of a staff meeting, or shared as information for individuals to explore on his/her own.

- **Effective non-verbal communication** – Make eye contact, relax facial muscles (jaw and

brow), uncross arms, and subtly lean towards the speaker. Especially for those in leadership roles, avoid towering over subordinates.

- **Questioning** – 1) Define the goal of the request, making sure the other person can voluntarily choose a response. 2) Use positive action language that conveys positive actions (“I’d like you to keep me updated about this project”). 3) Use specific, clear language to avoid misunderstandings (“I need you to update me twice a week about this project”).
- **Reinforcement and reflecting** – Three key steps for listeners: 1) Demonstrate understanding of the speaker’s expressed emotion. 2) Reinforce the information by asking questions. 3) Reflect back to the speaker the meaning and importance of the shared information.
- **Self-disclosure** – Positive Introductions are one example of self-disclosure that encourage meaningful, personal introductions to new people. Participants gather in a supportive group and, in turn, share personal anecdotes aloud about a moment in life when they were at their best.
- **Full, engaged listening** – Active listening involves: 1) Paraphrasing what you heard by repeating back in your own words what the speaker said (“Let me make sure I understood you correctly: did you mean...?”). 2) Summarizing and condensing the main points you heard (“It sounds like you’re saying....”). 3) Clarifying and asking questions to gather more helpful information (“Would you explain further what you mean? I’m not quite sure I understand the full picture yet”). 4) Soliciting feedback (“Do you feel like I’m listening to you and being attentive to what you’re saying?”).

Reinforcing the Value of MAGIC – A MAGIC Day

Combining the three dimensions of MAGIC for maximum impact, we recommend the decree of an annual MAGIC Day (or half-day) for TROSA’s staff. It would include activities designed to acknowledge meaningful connections, gratitude and improved communications experienced during the past year, as well as to reinforce the practices that occur on a more regular basis. A possible mix-and-match of activities for MAGIC day might include:

	Activities
Prior to MAGIC Day	<ul style="list-style-type: none"> • Begin random (computer-generated) cross-departmental partnering. This MAGIC partner will be expected to continue as one’s personal supporter for MAGIC practices throughout the year. • Have MAGIC partners collect three positive stories about their partners. • Prepare Gratitude Letters for another colleague. Invite past beneficiaries to send in Gratitude Letters as well.
On MAGIC Day	<p><u>Improving Communications</u></p> <ul style="list-style-type: none"> • Start day with <i>Positive Introductions</i> in breakout groups of cross-departmental teams. • Present tips for effective communications for staff to practice during the sharing. <p><u>Cultivating Gratitude</u></p> <ul style="list-style-type: none"> • <i>Exchange of Gratitude Letters</i> – Givers to find receivers over tea break or lunch to read the letters to them aloud. This includes letters from past beneficiaries that MAGIC partners can read aloud on their behalf. <p><u>Meaningful Connections</u></p> <ul style="list-style-type: none"> • <i>Reflected Best Self Exercise</i> - MAGIC partners come together and reveal the positive stories collected about their partners. <p><u>Overall</u></p> <ul style="list-style-type: none"> • Conclude the day with tips and exercises for staff to practice with their MAGIC partners throughout the year.

As management’s behavior plays a critical role to shape culture (Whitehurst, 2016), it is key that TROSA leaders be present and involved throughout the day to signal the importance of MAGIC for building connections and trust amongst staff. Beyond MAGIC Day, MAGIC needs to be sustained and integrated into TROSA’s culture to achieve long-term benefits. Simple interventions using common platforms of visual displays, blogs, and newsletters can encourage

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continued practice. As staff continue to sustain these areas of practice, TROSA may wish to consider involving the entire community in future MAGIC days. We envision increased social connection and trust within TROSA when MAGIC is embedded in its everyday language and culture.

Appendix 1: A Summary of TROSA's Comprehensive Care Model

(i) Therapeutic Programs	(ii) Safe & Sober Environment	(iii) Health & Wellness	(iv) Vocational Training	(v) Educational Programs	(vi) Continuing Care
<p>Peer Based Groups</p> <ul style="list-style-type: none"> • Nightly Games • Retreats & Dissipations <p>Evidence Based Therapies</p> <ul style="list-style-type: none"> • Motivational Interviewing • Helping Women Recover • Seeking Safety • CBT • DBT • Anger Management • Mindfulness <p>Life Skills</p> <ul style="list-style-type: none"> • Relapse Prevention • Parenting • Healthy Relationships • Cognitive Restructuring 	<p>Peer-Based Buddy System</p> <p>Three Cardinal Rules</p> <ul style="list-style-type: none"> • No Drugs or Alcohol • No Threats of Violence • No Acts of Violence <p>Basic Needs</p> <ul style="list-style-type: none"> • Food • Clothing and Toiletries • Shelter • Transportation 	<p>Medical Services (over 9,000 appointments/year)</p> <ul style="list-style-type: none"> • On-Site Duke Nurse Practitioner • STD/HIV testing • Specialty Care (dermatology, physical therapy, etc.) • Urgent Dental Care • Eye Care <p>Mental Health (over 4,700 appointments/year)</p> <ul style="list-style-type: none"> • Individual Counseling • Group Counseling • Psychiatric <p>Additional Non-Provider Meetings (about 1,500/year)</p> <ul style="list-style-type: none"> • Blood pressure checks, blood draws, care coordination <p>Medication (over 7,000 prescriptions/year)</p>	<ul style="list-style-type: none"> • Moving • Construction/Property Maintenance • Lawn Care/Maintenance • Office Administration • Auto/Truck Repair • Retailing & Sales • Picture Framing • Finance/Accounting • Warehousing • Food Services/Catering 	<ul style="list-style-type: none"> • Basic Literacy • Pre-GED • GED • Computer Skills Classes • Community College • Scholar Program 	<p>Work-Out Phase</p> <ul style="list-style-type: none"> • Resume writing • Interviewing • Personal finance • Job search skills • Outside Employment <p>Graduate Services</p> <ul style="list-style-type: none"> • Low-cost safe, sober housing • Transportation • Relapse prevention • Support groups

Appendix 2: Measure of Connectedness

We propose a survey by which TROSA can assess the level of connections and trust across departments.

Social Connectedness Scale – Revised (Lee, Draper, & Lee, 2001)*

Items are rated on a 6-point scale, ranging from 1 (“strongly disagree”) to 6 (“strongly agree”).

1. I feel distant from people.
2. I don't feel related to most people.
3. I feel like an outsider.
4. I see myself as a loner.
5. I feel disconnected from the world around me.
6. I don't feel I participate with anyone or any group.
7. I feel close to people.
8. Even around people I know, I don't feel that I really belong.
9. I am able to relate to my peers.
10. I catch myself losing a sense of connectedness with society.
11. I am able to connect with other people.
12. I feel understood by the people I know.
13. I see people as friendly and approachable.
14. I fit in well in new situations.
15. I have little sense of togetherness with my peers.
16. My friends feel like family.
17. I find myself actively involved in people's lives.
18. Even among my friends, there is no sense of brother/sisterhood.
19. I am in tune with the world.
20. I feel comfortable in the presence of strangers.

* Permission for use has been obtained by the author.

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